



# St Mary's

DIOCESAN SCHOOL FOR GIRLS

## Application for Enrolment Form

**FORMS TO BE RETURNED TO OUR ADMINISTRATION OFFICE WITH:**

- 2 Passport photos (preferably in colour)
- Certified copy of ID Document or Passport of **both** parents and/or guardians
- Certified copy of Unabridged Birth Certificate
- Copy of Immunization Card & Medical Aid Card
- Certified copy of student's most recent School Reports
- R300 non-refundable administration fee. No Postal Orders or cheques will be accepted. Our bank account, details are: St Mary's DSG, Standard Bank, Hatfield (branch code 011 545), Account No. 011 974 281. Please use as reference your daughter's name, surname and the grade and year of entry (eg."GR8 2015").

**ATTACH ONE (1)  
PHOTO HERE  
PLEASE**

**Please note that payment of any monies (i.e. Administration fee), without the supporting documentation, does not guarantee enrolment at St Mary's DSG and that applications which are incomplete or inaccurate in any respect will not be considered.**

### SECTION A : STUDENT'S DETAILS

SURNAME \_\_\_\_\_

FULL NAMES ( as per attached Birth Certificate) \_\_\_\_\_

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PREFERRED NAME \_\_\_\_\_

ID OR PASSPORT NUMBER \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

PLACE AND COUNTRY OF BIRTH \_\_\_\_\_

CURRENT AGE \_\_\_\_\_  
years months

NATIONALITY \_\_\_\_\_

AGE AT ENROLMENT: \_\_\_\_\_  
years months

DATE OF IMMIGRATION

Y	Y	Y	Y	M	M	D	D
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ENTRY DATE TO SOUTH AFRICA

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

COUNTRY OF RESIDENCE \_\_\_\_\_

STUDY PERMIT No: \_\_\_\_\_  
(foreign students only)

EXPIRY DATE

Y	Y	Y	Y	M	M	D	D
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Information required for Census statistical purposes

<b>A</b>		<b>B</b>		<b>C</b>		<b>I</b>		<b>W</b>		<b>O</b>	
Asian		African		Coloured		Indian		White		Other	

HOME LANGUAGE

Afrikaans	English	Ndebele	Sepedi	South Sotho	SiSwati	Tsonga	Tswana	Venda	Xhosa	Zulu

OTHER LANGUAGE \_\_\_\_\_

BLOOD GROUP

O+	O-	A+	A-	AB+	AB-	B+	B-	Unknown

RELIGIOUS DENOMINATION \_\_\_\_\_

CHILDREN IN YOUR FAMILY

1	2	3	4
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POSITION OF STUDENT IN THE FAMILY

1	2	3	4
---	---	---	---

**Referral** - Where did you hear about St Mary's DSG, i.e. Friend, Expo, Internet, Media ?

**Siblings**- Are other siblings currently at St Mary's DSG/St Alban's or WHPS? Please indicate grade & institution

Special Dietary Request (i.e. vegan, lactose free)

**Association to St Mary's DSG** - Is mother a St Mary's DSG Old Girl, or are any other family members Old Girls? Please indicate:

First & Maiden Name : \_\_\_\_\_

Relationship: \_\_\_\_\_ House: \_\_\_\_\_

From Year: \_\_\_\_\_ Gr \_\_\_\_\_

To Year : \_\_\_\_\_ Gr \_\_\_\_\_

Initial of Mother/Guardian:

Initial of Father/Guardian:

CANDIDATE'S RESIDES WITH

BIOLOGICAL PARENT/S

LEGAL GUARDIAN/S

ADOPTIVE PARENT/S

If parents are separated OR divorced, please indicate with whom applicant is living \_\_\_\_\_ (NAME)

If so, please indicate relationship to pupil:

BIOLOGICAL / ADOPTIVE PARENT/S  Mother/Father	LEGAL GUARDIAN/S  Grandparent/Family
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Is a 2<sup>nd</sup> report required?  
to be addressed to:

YES		NO	
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(Name & Surname)

- Are you a single parent family? Yes  No
- If a single family, is this because of a death, divorce, separation or other reason ? (PLEASE EXPLAIN)

• What is the legal status of the child's relationship with the other parent ? \_\_\_\_\_

• What is the legal relationship between the parents of the child? \_\_\_\_\_

Please advise of the following options. THE BIOLOGICAL FATHER/BIOLOGICAL MOTHER .....

**Has Access Rights**

No  Yes

**Is an Emergency Contact**

No  Yes

**Is a Legal Guardian**

No  Yes

**Is Living with Child**

No  Yes

In light of the above, please complete the section of the application form relating to the biological father/mother (Section D: DETAILS OF THE BIOLOGICAL FATHER/THE BIOLOGICAL MOTHER) . This information is critical, not only in providing the very best pastoral support for our children, but also allows us to operate fully within the framework of the law. All information is treated with full confidentiality.

IS YOUR CHILD WATER SAFE?

YES		NO	
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**SECTION B: SCHOOLS**

MOST RECENT: \_\_\_\_\_ PREVIOUS: \_\_\_\_\_

DATE LEFT: \_\_\_\_\_ GRADE LEFT: \_\_\_\_\_ DATE LEFT: \_\_\_\_\_ GRADE LEFT: \_\_\_\_\_

REASON: \_\_\_\_\_ REASON: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

LAST GRADE PASSED: \_\_\_\_\_ IN WHICH YEAR: \_\_\_\_\_ WHICH GRADE HAS BEEN REPEATED: \_\_\_\_\_

HAS ADMISSION TO ANY OTHER SCHOOL EVER BEEN REFUSED:

YES		NO	
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YEAR OF ENTRY TO ST MARY'S DSG:

DAY SCHOLAR

GRADE TO ENTER:

BOARDER

LANGUAGES: PLEASE SELECT 1<sup>ST</sup> ADDITIONAL LANGUAGE

AFRIKAANS

SEPEDI

IMMIGRANT FRENCH - (Applicable to Senior School only). This is only an option if your daughter qualifies as an immigrant candidate. **NOTE:** Immigrant French learners are required to submit an Immigrant Status Application form with supporting documents at registration. Junior School options to be discussed with the Principal.

**DETAILS OF ALL CHILDREN IN YOUR CARE WHO ARE CURRENTLY ATTENDING THIS SCHOOL**

	NAME & SURNAME OF SISTERS	GRADE	YEAR
1.			
2.			
3.			

Initial of Mother/Guardian:

Initial of Father/Guardian:

**CONSENT**

**NB: IN A CRITICAL SITUATION, PLEASE BEAR IN MIND THAT THERE MAY NOT BE TIME TO REFER TO YOUR CHILD'S RECORDS. THE SCHOOL THEREFORE RESERVES THE RIGHT TO UTILIZE THE QUICKEST MEDICAL SERVICE AVAILABLE.**

I, \_\_\_\_\_, being the parent/legal guardian of \_\_\_\_\_ hereby agree that the appointed St Mary's DSG practitioner may carry out emergency treatment as may be necessary.

Signature of Parent / Guardian: \_\_\_\_\_

**ST MARY'S DSG FOUNDATION**

The St Mary's DSG Foundation exists primarily for the establishment of a fund which will finance bursaries for pupils whose parents would not ordinarily be able to afford the school fees. A voluntary donation of R300 per learner per term (being a donation for the purpose of Section 18A of the Income Tax Act No.58 of 1962) will be added to your account. Please indicate, by marking with an X in the appropriate box, if you would like to become a member of the Foundation (or not).

	Yes, I would like to become a member of the St Mary's DSG Foundation and agree to a voluntary donation of R300 per learner per term
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	No, I would not like to become a member of the St Mary's DSG Foundation
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**NON REFUNDABLE ENROLMENT FEE**

Please mark your choice with an X

Please indicate your option

<b>ONCE OFF</b>
-----------------

<b>TWO PAYMENTS</b> only applicable to enrolment fees payable during year prior to entry
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**SCHOOL FEE PAYMENT OPTIONS**

Please indicate the preferred payment option with an X

<b>MONTHLY</b>
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<b>TERMLY</b>
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<b>ANNUAL</b>
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*The monthly payment option is only available to South African Identity Document holders.*

**SECTION C: DETAILS OF ACCOUNT HOLDER**

**TO BE COMPLETED BY PARENT/PERSON/EMBASSY/FIRM/COMPANY/ORGANIZATION**

**RESPONSIBLE FOR FEES:** (NB: THIS SECTION MUST BE COMPLETED, EVEN IF FEES ARE TO BE PAID BY PARENTS) .A LETTER FROM THE RELEVANT COMPANY/EMBASSY/ORGANIZATION OR INDIVIDUAL (if not parent) RESPONSIBLE FOR FEES, ACKNOWLEDGING SUCH RESPONSIBILITY, MUST ACCOMPANY THIS APPLICATION.(\*DELETE WHEREVER NOT APPLICABLE)

COMPANY NAME \_\_\_\_\_

COMPANY REGISTRATION NO. 

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ORGANISATION'S BANKERS: \_\_\_\_\_

**OR**

**Initial of Mother/Guardian:**

**Initial of Father/Guardian:**

**DETAILS OF ACCOUNT HOLDER (CONTINUED)**

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ID NUMBER

FULL NAME &amp; SURNAME

DESIGNATION

MR	MRS	MS	DR	REV	PROF	ADV	THE HON		
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OCCUPATION/PROFESSION: \_\_\_\_\_ (please write in full, i.e. research assistant, medical examiner )

EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_ (Manager/asst)

RELATIONSHIP TO SCHOLAR: \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_

Single, married, remarried, widower, traditional union

<b>Physical Address</b>  <b>Please print</b>	Unit/house #		<b>Postal Address</b>  <b>Please print</b>	Box/Unit #	
	Street name			Suburb	
	Suburb			Town/City & code	
	Town/City & code			Province	
Citizenship		Nationality	Residence (Country)		
Email:			Cell No.		

**\*Please note that you are obliged to notify us promptly of any changes of contact details.**

**SECTION D: DETAILS OF THE BIOLOGICAL FATHER**

SURNAME

FULL NAME

DESIGNATION

MR	DR	REV	PROF	ADV	THE HON		
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ID NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MARITAL STATUS

Single, married, remarried, widower, traditional union

OCCUPATION/PROFESSION \_\_\_\_\_ (please write in full, i.e. research assistant, medical examiner )

EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

<b>Physical Address</b>  <b>Please print</b>	Unit/house #		<b>Postal Address</b>  <b>Please print</b>	Box/Unit #	
	Street name			Suburb	
	Suburb			Town/City & code	
	Town/City & code			Province	
Citizenship		Nationality	Residence (Country)		
Email:			Cell No.		

**\*Please note that you are obliged to notify us promptly of any changes of contact details.**

Initial of Mother/Guardian:

Initial of Father/Guardian:

**SECTION E: DETAILS OF THE BIOLOGICAL MOTHER**

SURNAME \_\_\_\_\_ FULL NAME \_\_\_\_\_

DESIGNATION 

MS	MRS	ADV	DR	REV	PROF	THE HON		
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ID NUMBER 

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 MARITAL STATUS \_\_\_\_\_  
Single, married, remarried, widower, traditional union

OCCUPATION/PROFESSION \_\_\_\_\_ (please write in full, i.e. research assistant, medical examiner )

EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

<b>Physical Address</b>  <b>Please print</b>	Unit/house #		<b>Postal Address</b>  <b>Please print</b>	Box/Unit #	
	Street name			Suburb	
	Suburb			Town/City & code	
	Town/City & code			Province	
Province			Residence (Country)		
Citizenship			Nationality		
Email:			Cell No.:		
<b>*Please note that you are obliged to notify us promptly of any changes of contact details.</b>					

**SECTION F: EMERGENCY/ALTERNATIVE CONTACT (please specify)**

Next of Kin / Family / Friend: \_\_\_\_\_ Contact Number: \_\_\_\_\_

**SECTION G: DECLARATION**

I/We, the undersigned, \_\_\_\_\_ hereby certify that the information given by us on this application is complete and accurate. We agree to the conditions as set out below.

- I/We accept that the school is based on Christian principles and undertake not to undermine this position.
  - I/We accept joint and several liability to St Mary’s DSG for the due and punctual payment of all fees, subscriptions, levies or other amounts which may become due and payable to St Mary’s DSG or in respect of participation in or attendance of any extra curricular activity.
  - I/We accept that the monthly tuition and boarding fee payment options are only available to South African Identity Document holders.
  - I/We understand that our daughter/ward may be required to write an entrance test and/or have an admission interview with the Principal, and that the offer of a place in St Mary’s DSG will be dependent on the results of that test.
  - It is expected that pupils enrolled in the school live in the daily care of their parents or the legal guardian/s.
  - I/We consent to St Mary’s DSG requesting a personal credit check from an approved ITC agent.
- NB: The signatures of both parents and/or guardians are required or in the case of a single parent family, the signature of the legal guardian is required, with supporting documentation thereof. In the case of a divorce, a certified copy of the divorce order regarding custody and the person responsible for fees must be provided.**

SIGNATURE OF BIOLOGICAL/ADOPTIVE MOTHER/LEGAL GUARDIAN	DATE
SIGNATURE OF BIOLOGICAL/ADOPTIVE FATHER/LEGAL GUARDIAN	DATE
SIGNATURE OF ACCOUNT HOLDER	DATE

**Initial of Mother/Guardian:**

**Initial of Father/Guardian:**

**H. AGREEMENT (both parents, where relevant, are required to sign this form)**

**NAME OF PUPIL:** \_\_\_\_\_ (hereafter referred to as the Learner)  
I/We the undersigned, (hereafter jointly referred to as the Parents/Guardians), agree that, should our daughter/ward be accepted as a pupil at St Mary's DSG, (hereafter referred to as the School), a contract will come into existence between my/ourselves and the School, subject to the conditions set out below. We further agree that we will be jointly and severally liable for the payment of all fees, costs and disbursements arising from this contract.

- 4.1 FEES:** All school fees, as fixed from time to time by the Governing Body of the School, will be paid in advance not later than the first day of each school term.

A non-refundable enrolment fee is payable upon notification that the Learner has been accepted for enrolment. Please note that the enrolment fee is NOT part of the school fees. Should your daughter/ward for any reason not attend St Mary's DSG once the payment had been made, this enrolment fee remains non-refundable.

Interest shall be paid at prime rate on all school fees, costs and disbursements which are in arrears. In the event of the Parents/Guardians falling into arrears with the payment of any school fees, costs and/or disbursements, the School, after giving seven days' written notice to the Parents/Guardians, reserves to itself the right to discontinue any account, to summarily cancel any agreement relating to credit terms, to withhold examination results, reports and testimonials and/or to cancel, immediately, the Learner's enrolment from the School. In the event of the School exercising any of these powers, all amounts owing shall become due and payable forthwith, including, but not limited to, past and current term fees in lieu of notice. A statement prepared by the Bursar, showing the amount owing to the School, shall be sufficient and satisfactory proof of the amount due to the School. Should the Parents/Guardians refuse or neglect to pay fees, costs or disbursements for which they are liable, the School will take legal action for the collection of same. In such event, the Parents/Guardians will be jointly and severally liable for the payment of all fees, charges and costs on attorney and own client scale, together with collection commission and tracing fees.

- 4.2 RULES:** The learner shall comply with all the rules, regulations, policies and procedures laid down by the Governing Body of the School and by the Head respectively. The Head may, with the approval of the Chairperson or Deputy Chairperson of the Governing Body, expel the Learner from School if the Learner violates any of the rules, regulations, policies or procedures, or if the Learner's conduct, in the opinion of the Head, is inconsistent with the School's interests or the Learner's continued enrolment at the School. In this event, the Parents/Guardians of the Learner concerned will be liable for the School fees for the rest of the term during which the Learner is expelled, together with any charges incurred. The Parents/Guardians hereby give permission to the Head to authorize from time to time, and when it is deemed necessary, searches of the person and possessions of the Learner with the object of establishing the possible presence of any drugs or other habit-forming substances. Such permission is subject to the condition that no male person may perform such a search.

- 4.3 AUTHORITY OF THE HEAD:** The Head is hereby authorised by the Parents/Guardians, at all times during School terms, to act in loco parentis. This power will be exercised in the best interest of the Learner, as determined by section 28(2) of the Constitution of South Africa, 1996, and in terms of all relevant education laws of the country. This power includes the granting of consent for medical treatment, operations and anaesthetics. The Head or her/his Deputy will consult with the Parents/Guardians as far as possible, but in the case of an emergency, the Head or her/his Deputy will act in a manner which, in her/his opinion, is in the best interest of the Learner.

- 4.4 INDEMNITY:** We hereby indemnify, hold harmless and absolve St Mary's DSG from any claim that we hereby by law might have against the School for the death of or injury to our daughter/ward; medical expenses incurred as a result of such death or injury; or any damage to property of our daughter/ward or ourselves. For purposes hereof, it matters not that such death, injury or damage have occurred on or outside school premises or during or outside normal school hours, provided that such death, injury or damage occurs as a result, directly or indirectly of school activities.

- 4.5 INSURANCE:** It is the responsibility of the Parents/Guardians to ensure that all personal belongings of the said pupil are adequately insured against loss, and the school cannot be held responsible for loss or damage to the personal property of the pupil.

- 4.6 PROTECTION OF PERSONAL INFORMATION:** By entering into this contract, and unless you at any time instruct the School expressly and in writing to the contrary, your consent is given for the School to:

- 4.6.1 collect, store and process credit information about you and any third party or divorced or separated parent responsible for payment of any or all amounts comprised in the fees;
- 4.6.2 collect, store and process names, contact details and information relating to yourself and your daughter/ward, and to such information being made available to other parents/guardians, staff or responsible persons engaged

**Initial of Mother/Guardian:**

**Initial of Father/Guardian:**

or authorized by the School for School-related purposes to the extent required for the purpose of managing relationships between the School, parents/guardians, and current learners as well as providing references and communicating with the body of former learners;

4.6.3 include photographs, with or without name, of your daughter/ward in School publications, or in press releases to celebrate the School's or your daughter's/ward's activities, achievements or successes;

4.6.4 supply information and a reference in respect of your daughter/ward to any educational institution which you propose your daughter/ward may attend. We will take care to ensure that all information that is supplied relating to your daughter/ward is accurate and any opinion given on his/her ability, aptitude and character is fair. However, the School cannot be liable for any loss you or your daughter/ward is alleged to have suffered resulting from opinions reasonably given, or correct statements of fact contained, in any reference or report given by us; and

4.6.5 inform any other school or educational institution to which you propose to send your daughter/ward of any outstanding fees.

The School may not distribute or otherwise publish any of your personal information in its possession, unless you give your consent, in writing, to the School that it may do so. Should this be the case, the School may only distribute or otherwise publish the information specified in your consent to the people and for the purpose stated in your written consent.

4.7 **CANCELLATION OF ENROLMENT:** Should the Parents/Guardians wish to terminate this contract, for any reason, they shall give A FULL TERM'S NOTICE OF CANCELLATION of enrolment of the Learner or, in lieu thereof, pay a full term's fees. Such notice must be in writing, and must reach the Head of School not later than the first day of the last term that the Learner will attend the School. This notice shall either be faxed, emailed or hand delivered to the School (in which event, the onus of providing receipt by the addressee shall be on the sender of such notice), or shall be sent by registered post to the applicable "domicilium". (This condition does not apply to the final term of the Learner's Matric year, but it DOES apply at any other time, INCLUDING the end of the Primary School phase. If the Head does not receive such notice timeously, and your daughter/ward is withdrawn from the school, you will be liable for a full term's fees in lieu of notice and you will be required to settle all outstanding accounts immediately.

If the Head deems it in the interest of the School, or in the interest of a Learner, she/he may terminate this contract on giving the Parents/Guardians of the Learner 30 days' notice in writing. Notwithstanding the above, when the Head and the Chairperson of the Governing Body deem it necessary, in the interest of the School, they may give twenty-four hours' written notice of termination of the Learner's enrolment. In both cases of termination of the Learner's enrolment, mentioned above, the Parents/Guardians will remain liable for the balance of the term's fees.

4.8 **AMENDMENT OF CONDITIONS OF ENROLMENT:** The School shall be entitled to amend the conditions of enrolment after giving two terms' written notice to all parties concerned.

FATHER	MOTHER
*POSTAL ADDRESS: _____ _____ -----	*POSTAL ADDRESS: _____ _____ -----
TEL. NO.(W):	TEL. NO.(W):
TEL. NO.(H):	TEL. NO.(H):
CELLPHONE:	CELLPHONE:
EMAIL:	EMAIL:
SIGNED AT	SIGNED AT
ON THE            DAY OF            20	ON THE            DAY OF            20
SIGNATURE:	SIGNATURE:

Initial of Mother/Guardian:

Initial of Father/Guardian:

<b>ACCOUNT HOLDER</b>	<b>KINDLY NOTE THAT INCOMPLETE APPLICATION FORMS WILL NOT BE PROCESSED. WHERE SOME SECTIONS ARE CONSIDERED REPETITIVE YOUR ASSISTANCE AND COOPERATION IN THE COMPLETION HEREOF IS REQUIRED.</b>
<b>*POSTAL ADDRESS:</b> _____ _____ -----	
<b>TEL. NO.(W):</b>	
<b>TEL. NO.(H):</b>	
<b>CELLPHONE:</b>	
<b>EMAIL:</b>	
<b>SIGNED AT</b>	
<b>ON THE                    DAY OF                    20</b>	
<b>SIGNATURE:</b>	

*\*Please note that you are obliged to notify us promptly of any changes of contact details.*

**THE APPLICATION PROCESS:**

1. Complete and return the application form with the supporting documentation as listed. Please follow up with us if you do not receive an acknowledgement of our receipt of your form.
2. Documents may initially be emailed to the Admission Secretary to secure an assessment appointment. However, the original must be submitted to the school for the process to be concluded.
3. House placements and New Girls Packs will be sent to parents by October of the year preceding entry.

**Initial of Mother/Guardian:**

**Initial of Father/Guardian:**